

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or Docket Number

10662433

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

|   |                 |              |
|---|-----------------|--------------|
| TOTAL CLAIMS  | 15              |              |
| FOR   | NUMBER FILED    | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 15 minus 20 = * |              |
| INDEPENDENT CLAIMS  | 2 minus 3 = *   |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                 |              |

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 370.00 |
| X\$ 9=    |        |
| X42=      |        |
| +140=     |        |
| TOTAL     |        |

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 740.00 |
| X\$18=    |        |
| X84=      |        |
| +280=     |        |
| TOTAL     | 0.00   |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

|             |   |     |                                    |               |
|-------------|---|-----|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT  |     | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * 7 | Minus ** 20                        | = 13          |
|             | Independent   | * 1 | Minus *** 3                        | = 8           |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |     |                                    |               |

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X84=                |                        |
| +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

(Column 1)

(Column 2)

(Column 3)

|             |   |   |                                    |               |
|-------------|---|---|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT  |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * | Minus **                           | =             |
|             | Independent   | * | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                    |               |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X84=                |                        |
| +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

(Column 1)

(Column 2)

(Column 3)

|             |   |   |                                    |               |
|-------------|---|---|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT  |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * | Minus **                           | =             |
|             | Independent   | * | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                    |               |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X84=                |                        |
| +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.